UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

	REQUEST FOR PATENT	FEE REFUND			
1 Da	te of Request: 2 Se	rial/Paten	t # <u>/0/5</u>	17715	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
V	Filing			\$ 100	
	Amendment			\$	
	Extension of Time			\$	
	Notice of Appeal/Appeal			\$	
	Petition			\$	
	Issue			\$	
	Cert of Correction/Terminal Disc	•	*	\$	
	Maintenance			\$	
	Assignment			\$	
	Other			\$	
			7 TOTAL AMOUNT OF REFUND \$ 100		
		8 TO BE	8 TO BE REFUNDED BY:		
10 REASON:			Treasury Check		
	Overpayment		Credit Dep	osit A/C #:	
	Duplicate Payment	9	20 1	1495	
	No Fee Due (Explanation):				
	FUND REQUESTED BY: ED/PRINTED NAME: John Anders		TITLE: Para	12 0 0-	
ŀ	NATURE: In Audi		-21	8-940 et 211	
	TOUT DATE		PHONE:	110 04 041	
****	ICE: PCI DO/E0	*****	*****	*****	
	S SPACE RESERVED FOR FINANCE USE O				
APPI	ROVED:	_ DATE:	***************************************		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B